STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER The Tri City Star		2. DATE 09/27/2013
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 51(except week of Christmas)	3B. ANNUAL SUBSCRIPTION PRICE $ 49.98/50.90
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 306 West 4th Street White, SD 57276		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 207 Kasan Ave. Volga, SD 57071-0018		
6. FULL NAME OF PUBLISHER: Linda R Schumacher		

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
RFD News Group, Inc.	207 Kasan Ave. Volga, SD 57071-0018

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

First National Bank of Volga Volga, SD 57071

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	450	450
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	65	70
2. Mail Subscription (Paid and or requested)	332	290
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	397	360
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	0	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	26	26
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	413	431
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	37	19
2. Return from News Agents	0	0
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	450	460

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

x Linda R Schumacher (Signature)

Publisher (Title)

State of South Dakota)

§

County of Brooke M HOFF)

(Seal)

Sworn to before me this 27 day of Sept, 2013

Marjorie M. Hoff

Notary Public

My commission expires: August 18, 2015

Form: SOS REC 051 7/2004

MARJORIE M HOFF NOTARY PUBLIC SEAL STATE OF SOUTH DAKOTA